Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Α	For the	e 2017 cale	ndar year, or tax year be	ginning	, 2017, a	and ending			, 20				
В	Check it	f applicable:	C Name of organization Citi	zens for Energizing Michigan's	Economy	_		D Employer	identification n	umber			
	Address	change	Doing business as						46-4355362				
	Name cl		Number and street (or P.O	. box if mail is not delivered to street a	ddress)	Room/suite		E Telephone number					
П	Initial re		2145 Commons Parkwa	v			517-899-1874						
ī		ırn/terminated		ince, country, and ZIP or foreign posta	l code								
П		ed return	Okemos, MI 48864					G Gross rece	eipts \$ 11	5,000,000			
П				ipal officer: Howard Edelson					oordinates? Yes				
	Applicat	uon pending	2145 Commons Parkwa						ncluded? Yes				
	T			y, Okemos, wii 48864	247/-1/41	527			st. (see instructio				
-		mpt status:			947(a)(1) or	527				1107			
J	Website		rgizingmichigan.org	7 A	liv.			exemption nu					
_		-	Corporation Trust	Association	LYea	ar of formation	n: 2013	M State of	f legal domicile:	MI			
F	art I	Summ			.1 1.1			4 -1					
	1	-		i's mission or most significant									
Ce		public on issues facing Michigan, and to advocate citizen participation and obtain grassroots support for public											
nai				or local legislation, and ballot q									
ver	2			ization discontinued its opera				25% of its	s net assets.				
ဗ္	3		_	ne governing body (Part VI, lin				3		3			
Activities & Governance	4	Number	of independent voting r	members of the governing boo	dy (Part VI	, line 1b)		4		3			
	5	Total nur	nber of individuals emp	oloyed in calendar year 2017 (F	Part V, line	e 2a) .		5		0			
	6	Total nur	nber of volunteers (esti	mate if necessary)				6		0			
	7a	Total unr	elated business revenu	e from Part VIII, column (C), lin	ne 12 ,	. , .		7a		0			
	b	Net unre	lated business taxable	income from Form 990-T, line	34			7b		0			
							Prior Yes	ar	Current Ye	ar			
	8	Contribu	tions and grants (Part V	/III, line 1h)			1	,513,346	1!	5,000,000			
Revenue	9		service revenue (Part V	,010,010		,,000,000							
	10			/III, line 2g) , . . , lumn (A), lines 3, 4, and 7d) .						211			
Re	11									211			
	12												
-	13						1	,513,346	1;	5,000,211			
				d (Part IX, column (A), lines 1-									
	14				umn (A), line 4)								
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) Professional fundraising fees (Part IX, column (A), line 11e)											
ens	16a		The state of the s										
ж	b		draising expenses (Parl				5						
ш	17			n (A), lines 11a-11d, 11f-24e)	1 1		2	,569,116		1,086,373			
	18			7 (must equal Part IX, column				,569,116		1,086,373			
_	19	Revenue	less expenses. Subtra	ct line 18 from line 12	. P)55,770>		3,913,838			
or ces						Be	ginning of Cur	rent Year	End of Ye	ar			
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16) .					160,186	14	1,074,024			
A As	21		ilities (Part X, line 26) .					0		0			
Ž,	22	Net asse	ts or fund balances. Su	btract line 21 from line 20 .	200			160,186		1,074,024			
P	art II	Signa	ture Block										
Un	der pena	alties of perju	ry, I declare that I have exam	ined this return, including accompanyi other than officer) is based on all inform					knowledge and	belief, it is			
Sig		Sign	ature of officer				Dat	e					
		Туре	or print name and title										
Da	id	Print/Ty	pe preparer's name	Preparer's signature		Date		Charle	T if PTIN				
Pa								Check self-emplo	j if				
	epare		name •	1			Firm	's EIN ►					
Us	se On	ı y											
Ma	v the IF		ddress ► s this return with the pr	enarer shown above? (see ins	tructions		Phor	ne no.	□ Vos	No			

Part		ns a response or note to any line in this Part III	🗆
1	Briefly describe the organization's	mission:	
	Conduct research and develop an e	ucational plan and materials and present these findings to the general public	
		olic y .	
2		significant program services during the year which were not listed on the	Yes ☑ No
3		ucting, or make significant changes in how it conducts, any program	Yes ☑ No
	If "Yes," describe these changes of	n Schedule O.	
4	expenses. Section 501(c)(3) and 5	m service accomplishments for each of its three largest program services, as D1(c)(4) organizations are required to report the amount of grants and allocations, for each program service reported.	
4a	(Code:) (Expenses \$	691,516 including grants of \$) (Revenue \$15,6	000,000)
	Conduct research and develop an ein regards to energy and economic	ucational plan and materials and present these findings to the general public olicy.	
4b		including grants of \$) (Revenue \$	
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program services (Describe	n Schedule ())	
-ru	(Expenses \$ inclu	ing grants of \$) (Revenue \$)	
4e	Total program service expenses	691,516	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	1	
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	1	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes;" complete Schedule G, Part III	19		1

Part	Checklist of Required Schedules (continued)			
			Yes	No
20 a		20a		1
21 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or demostic grants are compared to School at Land 11.	20b	,	
22	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	21	✓	1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22	-	V
20	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		•
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Schedule L, Part IV A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Schedule L, Part IV A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee.	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		-	
	19? Note. All Form 990 filers are required to complete Schedule O.	38	V	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
10	Futurable number and state of the Day O of Forms 1000 Februar O if and applicable		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	-	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	64		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	-	1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
ь	If "Yes," enter the name of the foreign country: ▶		177	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
_	(FBAR).		-	-
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		4
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	-	-
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1	
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Va	- V	
	gifts were not tax deductible?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).	0.0		7.11
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	1		
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a	-	
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	36		
а	Initiation fees and capital contributions included on Part VIII, line 12			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
ь	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	But the second s	14a		1
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		1
	in 165, has it his a form 125 to report these payments in 170, provide an explanation in schedule 0.	140		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	ee ins	tructi	ions.
Secti	on A. Governing Body and Management			
-	on an action in group and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2 3	Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct	2		1
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6		1
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8 a	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body?	8a	~	
9 9	Each committee with authority to act on behalf of the governing body?	8b 9	✓	1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)	
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a 10b		1
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	1	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	III	•	
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a 12b	1	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13 14 15	Did the organization have a written whistleblower policy?	13	1	
a b	The organization's CEO, Executive Director, or top management official	15a 15b		√
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		✓
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)
19	Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest (policy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and red Howard Edelson, 2145 Commons Parkway, Okemos, MI 48864	cords:	•	

Form	COO	1004	71

7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Howard Edelson	1									
President		1		1				0	0	0
(2) David Mengebier	1									
Vice President		. ✓		1				0	0	0
(3) Ronn Rasmussen	1									
Secretary/Treasurer		1		1				0	0	0
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

	(A) Name and title		(B) Position (do not check more that box, unless person is be officer and a director/fru					one n an	(D) Reportable compensation from	(E) Reportable compensation fro			of
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISO	C)	compens from the organization and relations organizations	ation ne tion ted
(15)							ā.						
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b c	Sub-total	•						A A A	0		0		(
2	Total number of individuals (including b reportable compensation from the orga	ut not limited		-	_		above	e) w	ho received mo	ore than \$100,	-	of	ì
3	Did the organization list any former of employee on line 1a? If "Yes," complete	officer, direc										3	es No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater that	an \$1	50,0	000	? //	"Ye	s,"	complete Sch			4	- 1
5	Did any person listed on line 1a receive for services rendered to the organizatio	or accrue co	mper	nsat	ion	froi	n any	un	related organiz	ation or indivi	dual	5	
Section	on B. Independent Contractors	11 100, 0	omp.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	007	Cut	ne	0, 2	adii peradii		•	3	1
1	Complete this table for your five highest compensation from the organization. Reyear.		nsatio										s tax
	(A) Name and business ac	Idress							(B) Description of s	ervices	Co	(C) ompensatio	n
2	Total number of independent contract received more than \$100,000 of comper							th	ose listed abo	ove) who			

Par	VIII	Check if Schedule C		a resi	nonse or note to	any line in this l	⊃art VIII		П
		Officer if Schedule C	Contains	<u>u 165</u>	porise of note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns	3 , , ,	1a					
iran	ь	Membership dues .		1b			27		
s, G	С	Fundraising events,		1c					
Sifft ar /	d	Related organizations		1d					
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (con		1e					
tion r S	f	All other contributions, g							
ibr		and similar amounts not inc		1f	15,000,000				
d C	g	Noncash contributions include							
9 g	h	Total. Add lines 1a-1	f , , .			15,000,000			
anc.					Business Code				
e e	2a								
e B	b								
Program Service Revenue	С								
Se	d								
E	е								
rog	T	All other program ser							1
Δ.	3	Total. Add lines 2a-2 Investment income							
	3	and other similar amo				244			
	4	Income from investmen			_	211			
	5								
	3	Royalties	(i) Real		(ii) Personal				
	6a	Gross rents			**				
	b	Less: rental expenses		-					
	c	Rental income or (loss)							
	d	Net rental income or	(loss)						
	7a	Gross amount from sales of	(i) Securit	ies	(ii) Other				
		assets other than inventory							
	ь	Less: cost or other basis and sales expenses .							
	c	Gain or (loss)							
	d	Net gain or (loss) .							
Other Revenue	8a	Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18	ed on line 1						
돺	b	Less: direct expenses							
•	c	Net income or (loss) f	rom fundra	aising	events . >				
	9a	Gross income from ga See Part IV, line 19							
	b	Less: direct expenses	3	. b					
	c	Net income or (loss) f	rom gamin	g acti	vities ▶				
	10a	Gross sales of in returns and allowance							
		Less: cost of goods s			entory ▶				
	С	Net income or (loss) f Miscellaneous R		OT IIIVE	Business Code				
	11a	Miscellancous	IOVOTIGE		Daniess Oute	7.05			7
	b								
	c								
	d	All other revenue							
	e	Total. Add lines 11a-							
	12	Total revenue. See in				15,000,211			

Form 990 (2017) Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	125,000	125,000		Party Comment
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees): Management				
a		20.405		20.405	
b	Legal , , . , , . , , , , ,	28,485		28,485 772	
d	Lobbying	112		112	
e	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest , , , , , , , , , ,				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization ,				
23 24	Other expenses, Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Proxy Tax	365,600		365,600	
b	Education	386,674	386,674		
C	Candidate Advocacy	179.842	179,842		
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,086,373	691,516	394,857	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2017)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	159,986	1	1,073,712
	2	Savings and temporary cash investments	200	2	13,000,312
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net , . ,		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section		0	
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
sts		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
4	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or	1		
		other basis. Complete Part VI of Schedule D	6.	-5	
	b	Less: accumulated depreciation		10c	
	11	Investments – publicly traded securities		11	*
	12	Investments—other securities. See Part IV, line 11		13	
	13	Investments – program-related. See Part IV, line 11		14	
	14 15	Intangible assets		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	160,186		14.074.024
-	17	Accounts payable and accrued expenses	100,180	17	14,074,024
	18	Grants payable		18	-
	19	Deferred revenue		19	-
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D ,		21	-0
0	22	Loans and other payables to current and former officers, directors,			
≝		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons, Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	_
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
Ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.	1		
an	27	Unrestricted net assets , , , , , , , , , , , , ,		27	
Bal	28	Temporarily restricted net assets , , , , , , , , , ,		28	
P	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds ،	160,186		14,074,024
§	33	Total net assets or fund balances	160,186		14,074,024
	34	Total liabilities and net assets/fund balances	160,186	34	14,074,024
					Form 990 (2017)

-	4	0
Page	- 1	2

~9~				
			rt XI Reconciliation of Net Assets	Pari
		2 7 .	Check if Schedule O contains a response or note to any line in this Part XI	
000,211		1	Total revenue (must equal Part VIII, column (A), line 12) , . , . , . , . , . , . , , .	1
086,373		2	Total expenses (must equal Part IX, column (A), line 25)	2
913,838		3	Revenue less expenses. Subtract line 2 from line 1	3
160,186		4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4
		5	Net unrealized gains (losses) on investments	5
		6	Donated services and use of facilities . , , . , , . ,	6
		7	Investment expenses , . , . , ,	7
		8	Prior period adjustments	8
		9	Other changes in net assets or fund balances (explain in Schedule O)	9
			Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	10
074,024		10	33, column (B))	
			t XII Financial Statements and Reporting	Part
. 🗆			Check if Schedule O contains a response or note to any line in this Part XII	
s No				
1 3			Accounting method used to prepare the Form 990: 🗸 Cash 🗌 Accrual 🔲 Other	1
		oplain in	If the organization changed its method of accounting from a prior year or checked "Other," ex	
	-		Schedule O.	
1	2a			2a
		piled or	If "Yes," check a box below to indicate whether the financial statements for the year were com-	
			reviewed on a separate basis, consolidated basis, or both:	
-	-		☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	
1	2b	4.4.2	The first of San Francisco Control of the first of the fi	Ь
		ed on a	If "Yes," check a box below to indicate whether the financial statements for the year were audit	
			separate basis, consolidated basis, or both:	
	10000		☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	
			If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o of the audit, review, or compilation of its financial statements and selection of an independent account.	C
_	2c			
		xplain in	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	
		r	* SOUR AND THE RESERVE AND THE	_
,			As a result of a federal award, was the organization required to undergo an audit or audits as set	3a
1	3a		the Single Audit Act and OMB Circular A-133?	
	21-		If "Yes," did the organization undergo the required audit or audits? If the organization did not undergoired audit or audits, explain why in Schedule O and describe any steps taken to undergo such a second or audits.	b
	3b	IUCIUS.	required audit of about excisin why in achedule U and describe any steps taken to underdo such a	

SCHEDULE I (Form 990)

Department of the Treasury

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

➤ Go to www.irs.gov/Form990 for the latest information.

Schedule I (Form 990) (2017)

OMB No. 1545-0047

Name of the organization			-			Em	ployer identification number
Citizens for Energizing Michigan's Ecol							46-4355362
Part I General Information							
1 Does the organization maintai the selection criteria used to a			•		grantees' eligibility for	•	
2 Describe in Part IV the organize							
Part II Grants and Other As 990, Part IV, line 21, fo					duplicated if additio		swered "Yes" on Form d.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Electric Markets Research Fnd						* -2	
455 Mass Ave NW, Washington DC	46-1296884	501(c)(3)	25,000				unrestricted donation
(2) Michigan Chamber Commerce	20 4020020	504(-)(0)	100,000				unrestricted donation
600 S Walnut, Lansing, MI 48933 (3)	38-1626029	501(c)(6)	100,000				unrestricted donation
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section 3 Enter total number of other or							

Cat. No. 50055P

	ince to Domestic Individual fadditional space is needed		ne organization ansv	vered "Yes" on Form 990,	Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistanc
	n. Provide the information r				onal information.
					onal information.
					onal information.
					onal information.
					onal information.
					onal information.
Board of Directors meet annually regard					onal information.
t IV Supplemental Informatio					onal information.

Schedule I (Form 990) (2017)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

 Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Employer identification number Citizens for Energizing Michigan's Economy 46-4355362 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for 1 definition of "political campaign activities") Political campaign activity expenditures (see instructions) Complete if the organization is exempt under section 501(c)(3). Part I-B Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 , . . 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . Yes No Yes No b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures, Add lines 1 and 2. Enter here and on Form 1120-POL, 3 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (c) EIN (a) Name (b) Address (d) Amount paid from (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-. (1) (2)(3)(4)(5) (6)

			•
Н	ag	10	1

Part II-A		Complete if the organization section 501(h)).	on is exempt u	ınder section 5	01(c)(3) and file	d Form 5768 (ele	ction under
A	Check ►	if the filing organization belo address, EIN, expenses, and	iliated group membe	er's name,			
В	Check ▶	heck ► ☐ if the filing organization checked box A and "limited control" provisions apply.					
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)					(a) Filing organization's totals	(b) Affiliated group totals
	 Total lobbying expenditures to influence Total lobbying expenditures to influence Total lobbying expenditures (add lines) Other exempt purpose expenditures (action of the columns) Lobbying nontaxable amount. Enter columns. 		e a legislative bo 1a and 1b) 	ody (direct lobbyin	g)		
	If the ar	mount on line 1e, column (a) or (b) i	s: The lobbying	nontaxable amoun	t is:		
	Not ove	r \$500,000	20% of the an	nount on line 1e.			
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.		
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.		
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000.		
	Over \$1	7,000,000	\$1,000,000.				
		e organizations that made a s	ear Averaging lection 501(h) ele	Period Under sec ection do not hav ructions for lines	etion 501(h) e to complete al		Yes No
		Lobbyin	g Expenditures	During 4-Year A	veraging Period		
	Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
:	2a Lobbyi	ng nontaxable amount					
		ng ceiling amount of line 2a, column (e))					
	c Total lo	obbying expenditures					
	d Grassr	oots nontaxable amount					
		oots ceiling amount of line 2d, column (e))					
	f Grassr	oots lobbying expenditures					

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768		
For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(8	3)		(b)	
desci	iption of the lobbying activity.	Yes	No	Aı	nount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers? , . , , ,		~~~			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total, Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					_
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	;)(5), (or sec	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		1
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			3		1
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."				line (3, is
1	Dues, assessments and similar amounts from members		1		15,00	00,000
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).					
а	Current year		2a		17	79,842
b	Carryover from last year		2b			
c	Total		2c		17	79,842
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			0
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion o excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditure next year?		4			0
5	Taxable amount of lobbying and political expenditures (see instructions) ,	10	5		17	79,842
	Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gra- instructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup list	t); Par	t II-A, li	nes 1	and

Schedule C (Fo	rm 990 or 990-EZ) 2017		Page 4
Part IV	Supplemental Informati	ion (continued)	
companyon martine and fact that yet martine and fact one day on			